

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: MN
APPLICATION YEAR: 2011

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FORM 2
MCH BUDGET DETAILS FOR FY 2011

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: MN

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

A.Preventive and primary care for children:

\$ 3,034,016 (33.44%)

B.Children with special health care needs:

\$ 3,173,683 (34.98%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 799,993 (8.82%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

\$ 9,072,643

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 384,363

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 7,032,333

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 3,704,946

5. OTHER FUNDS (Item 15e of SF 424)

\$ 6,587,720

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 78,571

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 6,184,197

\$ 17,403,570

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 26,860,576

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 300,000

b. SSDI: \$ 100,000

c. CISS: \$ 132,000

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 136,511,917

h. AIDS: \$ 0

i. CDC: \$ 147,997

j. Education: \$ 0

k. Other: \$ 0

ED \$ 255,000

HRSA \$ 9,974,982

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 147,421,896

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 174,282,472

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: MN

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 9,427,664	\$ 9,150,372	\$ 9,149,872	\$ 9,151,370	\$ 9,150,372	\$ 9,046,795
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 612,776	\$ 226,615	\$ 544,038	\$ 49,014	\$ 646,380	\$ 208,443
3. State Funds <i>(Line3, Form 2)</i>	\$ 7,530,330	\$ 7,032,740	\$ 7,270,432	\$ 6,900,288	\$ 7,347,564	\$ 6,941,429
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 4,255,713	\$ 2,463,403	\$ 4,839,075	\$ 3,326,336	\$ 2,926,713	\$ 3,512,975
5. Other Funds <i>(Line5, Form 2)</i>	\$ 3,214,647	\$ 3,056,181	\$ 4,839,142	\$ 5,649,663	\$ 5,110,988	\$ 5,884,658
6. Program Income <i>(Line6, Form 2)</i>	\$ 95,916	\$ 24,779	\$ 79,707	\$ 50,782	\$ 24,779	\$ 68,246
7. Subtotal	\$ 25,137,046	\$ 21,954,090	\$ 26,722,266	\$ 25,127,453	\$ 25,206,796	\$ 25,662,546
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 123,337,396	\$ 124,929,538	\$ 124,929,538	\$ 120,921,380	\$ 107,739,686	\$ 124,950,676
9. Total <i>(Line11, Form 2)</i>	\$ 148,474,442	\$ 146,883,628	\$ 151,651,804	\$ 146,048,833	\$ 132,946,482	\$ 150,613,222
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: MN

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 9,043,482	\$ 9,072,643	\$ 9,073,569		\$ 9,072,643	
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 842,441	\$ 2,560	\$ 811,024		\$ 384,363	
3. State Funds <i>(Line3, Form 2)</i>	\$ 7,032,333	\$ 6,806,402	\$ 7,032,333		\$ 7,032,333	
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 3,248,335	\$ 3,697,877	\$ 3,560,507		\$ 3,704,946	
5. Other Funds <i>(Line5, Form 2)</i>	\$ 5,420,487	\$ 6,217,417	\$ 6,269,070		\$ 6,587,720	
6. Program Income <i>(Line6, Form 2)</i>	\$ 50,782	\$ 78,571	\$ 68,247		\$ 78,571	
7. Subtotal	\$ 25,637,860	\$ 25,875,470	\$ 26,814,750	\$ 0	\$ 26,860,576	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 131,916,672	\$ 141,927,894	\$ 155,303,472		\$ 147,421,896	
9. Total <i>(Line11, Form 2)</i>	\$ 157,554,532	\$ 167,803,364	\$ 182,118,222	\$ 0	\$ 174,282,472	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Form3_Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2009
Field Note:
Delays in filling positions and less anticipated spending in supplies resulted in needing less than anticipated unobligated funds.
2. **Section Number:** Form3_Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2008
Field Note:
Delays in filling positions resulted in needing less than anticipated unobligated funds.
3. **Section Number:** Form3_Main
Field Name: LocalMCHFundsExpended
Row Name: Local MCH Funds
Column Name: Expended
Year: 2009
Field Note:
Grantees reported more than anticipated in matching funds.
4. **Section Number:** Form3_Main
Field Name: LocalMCHFundsExpended
Row Name: Local MCH Funds
Column Name: Expended
Year: 2008
Field Note:
Grantees reported more than anticipated in matching funds.
5. **Section Number:** Form3_Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2009
Field Note:
Additional state dollars became available for match.
6. **Section Number:** Form3_Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2008
Field Note:
New state initiative resulted in additional funds targeting CSHCN (EHDI).
7. **Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2009
Field Note:
Less than .003 percent of total funds available come from Program Income. Minimal changes in the amount received result in significant variation in percent changed.
8. **Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2008
Field Note:
Less than .03 percent of total funds available come from Program Income. Minimal changes in the amount received result in significant variation in percent changed.
9. **Section Number:** Form3_Main
Field Name: OtherFedFundsExpended
Row Name: Other Federal Funds
Column Name: Expended
Year: 2008
Field Note:
Increase in funding was received from the Department of Agriculture to support the WIC program.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MN

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 5,663,157	\$ 4,869,036	\$ 6,686,063	\$ 4,990,685	\$ 5,436,921	\$ 5,457,523
b. Infants < 1 year old	\$ 976,008	\$ 1,851,315	\$ 2,307,968	\$ 2,117,230	\$ 2,067,237	\$ 2,934,090
c. Children 1 to 22 years old	\$ 9,299,945	\$ 7,325,566	\$ 7,851,159	\$ 8,428,320	\$ 8,283,994	\$ 7,282,244
d. Children with Special Healthcare Needs	\$ 7,416,649	\$ 6,717,061	\$ 7,924,223	\$ 8,117,578	\$ 8,012,925	\$ 8,122,418
e. Others	\$ 1,081,287	\$ 581,856	\$ 1,252,853	\$ 849,864	\$ 649,719	\$ 1,183,605
f. Administration	\$ 700,000	\$ 609,256	\$ 700,000	\$ 623,776	\$ 756,000	\$ 682,666
g. SUBTOTAL	\$ 25,137,046	\$ 21,954,090	\$ 26,722,266	\$ 25,127,453	\$ 25,206,796	\$ 25,662,546
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 150,000		\$ 205,569		\$ 150,000	
b. SSDI	\$ 100,000		\$ 100,000		\$ 94,644	
c. CISS	\$ 140,000		\$ 140,000		\$ 140,000	
d. Abstinence Education	\$ 499,072		\$ 488,623		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 101,057,284		\$ 99,384,981		\$ 100,711,985	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 7,835,597		\$ 12,127,216		\$ 1,699,284	
j. Education	\$ 533,000		\$ 533,000		\$ 533,000	
k. Other						
HRSA	\$ 12,866,116		\$ 11,950,149		\$ 4,259,722	
PRAMS	\$ 156,327		\$ 0		\$ 151,051	
III. SUBTOTAL	\$ 123,337,396		\$ 124,929,538		\$ 107,739,686	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MN

	FY 2009		FY 2010		FY 2011	
I. Federal-State MCH Block Grant Partnership	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
a. Pregnant Women	\$ 6,643,864	\$ 5,604,170	\$ 5,651,951	\$	\$ 5,696,238	\$
b. Infants < 1 year old	\$ 2,320,999	\$ 3,465,098	\$ 3,038,619	\$	\$ 3,522,025	\$
c. Children 1 to 22 years old	\$ 6,225,679	\$ 6,815,488	\$ 7,290,870	\$	\$ 6,971,376	\$
d. Children with Special Healthcare Needs	\$ 8,802,367	\$ 8,452,430	\$ 8,782,537	\$	\$ 9,023,895	\$
e. Others	\$ 793,951	\$ 833,349	\$ 1,225,773	\$	\$ 847,042	\$
f. Administration	\$ 851,000	\$ 704,935	\$ 825,000	\$	\$ 800,000	\$
g. SUBTOTAL	\$ 25,637,860	\$ 25,875,470	\$ 26,814,750	\$ 0	\$ 26,860,576	\$ 0

II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).

a. SPRANS	\$ 87,500	\$ 150,000	\$ 300,000
b. SSDI	\$ 94,644	\$ 94,644	\$ 100,000
c. CISS	\$ 140,000	\$ 105,000	\$ 132,000
d. Abstinence Education	\$ 0	\$ 0	\$ 0
e. Healthy Start	\$ 0	\$ 0	\$ 0
f. EMSC	\$ 0	\$ 0	\$ 0
g. WIC	\$ 124,576,089	\$ 143,584,571	\$ 136,511,917
h. AIDS	\$ 0	\$ 0	\$ 0
i. CDC	\$ 1,756,322	\$ 149,957	\$ 147,997
j. Education	\$ 512,250	\$ 300,000	\$ 0
k. Other			
ED	\$ 0	\$ 0	\$ 255,000
HRSA	\$ 4,598,815	\$ 10,419,300	\$ 9,974,982
HHS	\$ 0	\$ 500,000	\$ 0
PRAMS	\$ 151,052	\$ 0	\$ 0
III. SUBTOTAL	\$ 131,916,672	\$ 155,303,472	\$ 147,421,896

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

- 1. Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2009
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 2. Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2009
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 3. Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 4. Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 5. Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 6. Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2009
Field Note:
Delays in filling positions and less anticipated spending in supplies resulted in needing less than anticipated unobligated funds resulted in less administration costs.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MN

TYPE OF SERVICE	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 6,598,752	\$ 7,689,774	\$ 8,147,654	\$ 8,975,961	\$ 8,511,702	\$ 11,155,175
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 1,054,607	\$ 3,933,874	\$ 850,485	\$ 4,725,269	\$ 4,360,077	\$ 3,135,211
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 8,341,530	\$ 3,276,962	\$ 8,550,862	\$ 6,177,165	\$ 3,673,237	\$ 7,140,849
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 9,142,157	\$ 7,053,480	\$ 9,173,265	\$ 5,249,058	\$ 8,661,780	\$ 4,231,311
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 25,137,046	\$ 21,954,090	\$ 26,722,266	\$ 25,127,453	\$ 25,206,796	\$ 25,662,546

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MN

TYPE OF SERVICE	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 8,805,335	\$ 11,410,292	\$ 10,795,155	\$	\$ 11,351,551	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 4,331,061	\$ 3,409,894	\$ 3,464,458	\$	\$ 4,131,189	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 6,364,720	\$ 7,170,468	\$ 7,033,232	\$	\$ 6,032,603	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 6,136,744	\$ 3,884,816	\$ 5,521,905	\$	\$ 5,345,233	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 25,637,860	\$ 25,875,470	\$ 26,814,750	\$ 0	\$ 26,860,576	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

- 1. Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2009
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 2. Section Number:** Form5_Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 3. Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2009
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 4. Section Number:** Form5_Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 5. Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2009
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 6. Section Number:** Form5_Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 7. Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2009
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.
- 8. Section Number:** Form5_Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2008
Field Note:
In 2008 the electronic local public health reporting system underwent major changes in how grantee match was collected. This change required local public health to identify where the match was being expended and align that expenditure with specific activities to more accurately reflect how match funds are being used.

FORM 6						
NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED						
<small>Sect. 506(a)(2)(B)(iii)</small>						
STATE: MN						
Total Births by Occurrence: <u>72,382</u>				Reporting Year: 2008		
Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	<u>71,682</u>	<u>99</u>	<u>9</u>	<u>6</u>	<u>6</u>	<u>100</u>
Congenital Hypothyroidism	<u>71,682</u>	<u>99</u>	<u>150</u>	<u>50</u>	<u>50</u>	<u>100</u>
Galactosemia	<u>71,682</u>	<u>99</u>	<u>63</u>	<u>8</u>	<u>8</u>	<u>100</u>
Sickle Cell Disease	<u>71,682</u>	<u>99</u>	<u>22</u>	<u>21</u>	<u>21</u>	<u>100</u>
Other Screening (Specify)						
Biotinidase Deficiency	<u>71,682</u>	<u>99</u>	<u>74</u>	<u>9</u>	<u>9</u>	<u>100</u>
Cystic Fibrosis	<u>71,682</u>	<u>99</u>	<u>266</u>	<u>13</u>	<u>13</u>	<u>100</u>
Hemoglobinopathies	<u>71,682</u>	<u>99</u>	<u>39</u>	<u>21</u>	<u>21</u>	<u>100</u>
Organic Acidemias	<u>71,682</u>	<u>99</u>	<u>37</u>	<u>20</u>	<u>20</u>	<u>100</u>
Amino Acidemias	<u>71,682</u>	<u>99</u>	<u>34</u>	<u>11</u>	<u>11</u>	<u>100</u>
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	<u>71,682</u>	<u>99</u>	<u>51</u>	<u>5</u>	<u>5</u>	<u>100</u>
FAO	<u>71,682</u>	<u>99</u>	<u>48</u>	<u>21</u>	<u>21</u>	<u>100</u>
Screening Programs for Older Children & Women (Specify Tests by name)						
(1) Use occurrent births as denominator. (2) Report only those from resident births. (3) Use number of confirmed cases as denominator.						

FORM NOTES FOR FORM 6
None
FIELD LEVEL NOTES
None

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: MN

Reporting Year: 2009

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	8,364	67.0	0.0	20.5	3.0	9.5
Infants < 1 year old	71,682	34.0	0.0			66.0
Children 1 to 22 years old	14,972	33.0	0.0	32.0	16.0	19.5
Children with Special Healthcare Needs	7,344	48.0	0.0	35.0	1.0	16.0
Others	3,720	22.0	0.0	40.0	36.0	2.0
TOTAL	106,082					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

None

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: MN

Reporting Year: 2008

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	67,341	53,969	6,828	1,555	4,989			
Title V Served	5,044	3,623	521	128	340	9	52	371
Eligible for Title XIX	30,744	17,158	5,085	1,088	1,674	28	1,475	4,236
INFANTS								
Total Infants in State	73,528	62,797	5,650	1,348	3,733			
Title V Served	7,761	4,906	1,137	258	451	45	309	655
Eligible for Title XIX	32,302	18,103	5,369	1,130	1,767	29	1,547	4,357

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	65,812	5,723	0					5,723
Title V Served	3,751	1,014	279					1,014
Eligible for Title XIX	25,841	4,883	20					4,883
INFANTS								
Total Infants in State	67,223	6,305	0					6,305
Title V Served	5,008	1,828	925					1,828
Eligible for Title XIX	27,169	5,112	21					5,112

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

None

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MN

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	_____	_____	_____	_____	_____
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"	_____	_____	_____	_____	_____
4. Contact Person's Telephone Number	_____	_____	_____	_____	_____
5. Contact Person's Email	_____	_____	_____	_____	_____
6. Number of calls received on the State MCH "Hotline" this reporting period	_____ 0	_____ 0	_____ 0	_____ 0	_____ 0

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MN

	FY 2011	FY 2010	FY 2009	FY 2008	FY 2007
1. State MCH Toll-Free "Hotline" Telephone Number	<u>800 728-5420</u>	<u>800 728-5420</u>	<u>800 728-5420</u>	<u>(800) 728-5420</u>	<u>(800) 728-5420</u>
2. State MCH Toll-Free "Hotline" Name	Information and Referral Line	Information and Referral Line	Information and Referral Line	Information and Referral Line	Information and Referral Line
3. Name of Contact Person for State MCH "Hotline"	<u>Sarah Thorson</u>	<u>Sarah Thorson</u>	<u>Sarah Thorson</u>	<u>Sarah Thorson</u>	<u>Sarah Thorson</u>
4. Contact Person's Telephone Number	<u>651 201-3651</u>	<u>651 201-3651</u>	<u>651 201-3651</u>	<u>(651) 201-3651</u>	<u>(651) 281-9992</u>
5. Contact Person's Email	<u>sarah.thorson@state.mn.</u>	<u>sarah.thorson@state.mn.</u>	<u></u>	<u></u>	<u></u>
6. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>503</u>	<u>617</u>	<u>735</u>

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Form9_Main

Field Name: calls_2

Row Name: Number of calls received On the State MCH Hotline This reporting period

Column Name: FY

Year: 2009

Field Note:

MCYSHN's primary method of information dissemination is via the MCYSHN web pages. There were more than 150,000 page views in 2009. The toll-free hotline is primarily used by families with more complex issues who need individual guidance and support. The online directory of services home page had nearly 8,000 views.

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2011
[SEC. 506(A)(1)]
STATE: MN

1. State MCH Administration:
(max 2500 characters)

The Minnesota Department of Health is one of the major administrative agencies of state government. The Commissioner of Health is appointed by the governor with confirmation by the state senate. The department is organized into four Bureaus: Community & Family Health Promotion, Health Protection, Policy Quality & Compliance and Administrative Services. Within the Community and Family Health Bureau are the Divisions of: Community and Family Health, Health Promotion & Chronic Disease, Office of Minority & Multicultural Health and Office of Statewide Health Improvement Initiatives. The Community and Family Health Division administers the Title V Programs. Other programs within the Division of Community and Family Health include: WIC, Health Care Homes and the Office of Public Health Practice.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 9,072,643
3. Unobligated balance (Line 2, Form 2)	\$ 384,363
4. State Funds (Line 3, Form 2)	\$ 7,032,333
5. Local MCH Funds (Line 4, Form 2)	\$ 3,704,946
6. Other Funds (Line 5, Form 2)	\$ 6,587,720
7. Program Income (Line 6, Form 2)	\$ 78,571
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 26,860,576

9. Most significant providers receiving MCH funds:

CHBs (local public health agencies)

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	8,364
b. Infants < 1 year old	71,682
c. Children 1 to 22 years old	14,972
d. CSHCN	7,344
e. Others	3,720

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

The MCYSHN Program partners with the MDH Labs, the University of Minnesota Hospital and Mayo Clinic to provide newborn screening, diagnosis and follow-up services. The MSYHN program contracts with Gillette Children's Hospital to provide habilitative services in underserved areas of the state. Annually over \$5 million is distributed to family planning clinics, \$2 million to non-profit agencies who provide services to pregnant women and their infants; \$1,6 million for FAS prevention and intervention services and \$7.8 million for home visiting services.

b. Population-Based Services:
(max 2500 characters)

The Follow-Along Program provides ongoing screening for children at risk up to age three years, including the social emotional domain of development. Technical assistance and statewide trainings are offered in the areas of maternal depression, infant and children's mental health, reproductive health, hearing and vision screening, resources for families and children with special health needs and C&TC trainings.

c. Infrastructure Building Services:
(max 2500 characters)

Investment if the Data Epi Unit supports data collection, analysis, program planning and evaluation of Title V programs.

12. The primary Title V Program contact person:

Name	Laurel Briske
Title	MCH Manager
Address	P.O. Box 64882
City	St. Paul
State	MN
Zip	55164-0882
Phone	651-201-3872
Fax	651-201-3590

13. The children with special health care needs (CSHCN) contact person:

Name	John Hurley
Title	MCYSHN Manager
Address	P.O. Box 64882
City	St. Paul
State	MN
Zip	55164-0882
Phone	651-201-3643
Fax	651-201-3590

Email laurel.briske@state.mn.us

Web _____

Email john.hurley@state.mn.us

Web _____

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: MN

Form Level Notes for Form 11

None

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	
Numerator	141	141	142	149	
Denominator	141	141	142	149	

Data Source

MDH Newborn
Screening Program

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2009

Field Note:

We obtain our data from the newborn screening program, and their data has not been updated to 2009 yet.

2. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2008

Field Note:

Data from the Newborn Screening Program

3. Section Number: Form11_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>63</u>	<u>63</u>	<u>63</u>	<u>63</u>	<u>63</u>
Annual Indicator	<u>59.1</u>	<u>60.3</u>	<u>60.3</u>	<u>60.3</u>	<u>60.3</u>
Numerator	<u>90,109</u>	<u>103,284</u>	<u>103,284</u>	<u>103,284</u>	<u>103,284</u>
Denominator	<u>152,468</u>	<u>171,251</u>	<u>171,251</u>	<u>171,251</u>	<u>171,251</u>
Data Source				National Survey of CSHCN 05/06	National Survey of CSHCN 05/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>63</u>	<u>65</u>	<u>65</u>	<u>65</u>	<u>65</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2009
Field Note:
 Data source is the National Survey of CSHCN 2005/ 06

2. **Section Number:** Form11_Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2008
Field Note:
 Data source is the National Survey of CSHCN 2005/ 06

3. **Section Number:** Form11_Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2007
Field Note:
 Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2007 data not yet available.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	53.6	53.6	53.6	54	54
Annual Indicator	48.7	51.8	51.8	51.8	51.8
Numerator	74,252	88,280	88,280	88,280	88,280
Denominator	152,468	170,372	170,372	170,372	170,372
Data Source				National Survey of CSHCN 05/06	National Survey of CSHCN 05/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	54	54	54	54	54
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2009

Field Note:

data source: National Survey of CSHCN 2005/06

2. **Section Number:** Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2008

Field Note:

data source: National Survey of CSHCN 2005/06

3. **Section Number:** Form11_Performance Measure #3

Field Name: PM03

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective	<u>70</u>	<u>70</u>	<u>70</u>	<u>66</u>	<u>66.3</u>
Annual Indicator	<u>68.8</u>	<u>66.3</u>	<u>66.3</u>	<u>66.3</u>	<u>66.3</u>
Numerator	<u>104,898</u>	<u>116,294</u>	<u>116,294</u>	<u>116,294</u>	<u>116,294</u>
Denominator	<u>152,468</u>	<u>175,428</u>	<u>175,428</u>	<u>175,428</u>	<u>175,428</u>
Data Source				National Survey of CSHCN 05/06	National Survey of CSHCN 05/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>66.3</u>	<u>70</u>	<u>70</u>	<u>70</u>	<u>70</u>
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2009

Field Note:

Data source: National Survey of CSHCN 2005 / 06

2. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2008

Field Note:

Data source: National Survey of CSHCN 2005 / 06

3. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	78.5	78.5	78.5	91	91
Annual Indicator	73.5	90.7	90.7	90.7	90.7
Numerator	112,064	160,677	160,677	160,677	160,677
Denominator	152,468	177,112	177,112	177,112	177,112
Data Source				National Survey of CSHCN 05/06	National Survey of CSHCN 05/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	91	94	95	95	95
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2009
Field Note:
 Data Source: National Survey of CSHCN 2005 / 06

2. **Section Number:** Form11_Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2008
Field Note:
 Data Source: National Survey of CSHCN 2005 / 06

3. **Section Number:** Form11_Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2007
Field Note:
 Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	6.4	6.4	6.4	55	55
Annual Indicator	5.8	5.8	52.9	52.9	52.9
Numerator	8,843		39,459	39,459	39,459
Denominator	152,468		74,600	74,600	74,600
Data Source				National Survey of CSHCN 05/06	National Survey of CSHCN 05/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	57	57	59	59	59
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2009

Field Note:

Data Source: National Survey of CSHCN 2005 / 06

2. **Section Number:** Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2008

Field Note:

Data Source: National Survey of CSHCN 2005 / 06

3. **Section Number:** Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective	90	90	90	85	85
Annual Indicator	82.5	82.6	93.1	91.1	91.1
Numerator	55,417	58,242	65,174	65,124	65,135
Denominator	67,173	70,511	70,004	71,486	71,490
Data Source				National Immunization Survey	Estimates
Do not report the numerator because there are fewer than 5 events over the last year, and the number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Enter a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	92	93	93	93	94
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data will not be available from MN Vital Statistics until 2011. These data are estimates.

2. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data not yet available.

3. Section Number: Form11_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	13	13	12	13	12.5
Annual Indicator	12.5	13.8	13.9	12.9	13.1
Numerator	1,365	1,533	1,519	1,377	1,400
Denominator	109,134	110,819	109,548	106,591	107,000
Data Source				MN Vital Statistics	Estimates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	12	11.5	11	11	11
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2009

Field Note:

2009 data will not be available from MN Vital Statistics until 2011. These data are estimates.

2. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2008

Field Note:

2008 data not available yet.

3. Section Number: Form11_Performance Measure #8

Field Name: PM08

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	18	14	14.5	14	14.5
Annual Indicator	13.4	12.8	14.2	14.2	
Numerator	16,420	16,069	17,235	18,388	
Denominator	122,626	125,178	120,950	129,526	
Data Source				MN Dept. of Human Services	
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
If you cannot report the numerator because of the reasons above, explain in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	15	15	16	16	16
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 DHS data will not be available until next calendar year (2011).

2. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data not available from the MN Dept. of Human Services until 3/1/10 .

3. Section Number: Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.4	3.2	2.3	2	1.9
Annual Indicator	2.4	2.2	1.9	2.4	2.3
Numerator	24	23	20	25	24
Denominator	1,005,572	1,030,354	1,035,183	1,035,562	1,035,600
Data Source				MDH Injury Unit	Estimates
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	2.3	2.1	2.1	2.1	2
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

The MDH Injury Unit will not have precise 2009 data until 2011. These data are general estimates.

2. Section Number: Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data not yet available.

3. Section Number: Form11_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective		45	48	48	48
Annual Indicator	46.5	46.5		51.6	
Numerator					
Denominator					
Data Source				NIS data	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	52	53	53	53	54
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2009

Field Note:

The most recent birth cohort available on the NIS website is 2006.

2. **Section Number:** Form11_Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2008

Field Note:

2006 is most recent birth cohort available on NIS web site. Data from the 2006 cohort is recorded under 2008 because 2007 is not accessible on this screen. Additional NIS data may be available in August 2010.

3. **Section Number:** Form11_Performance Measure #11

Field Name: PM11

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data will not be available until 8/09 on NIS web site.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	98	98	90	85	90
Annual Indicator	85.2	80.2	88.9	96.7	
Numerator	59,657	60,683	65,434	69,790	
Denominator	70,030	75,656	73,608	72,169	
Data Source					MDH newborn screening program
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	97	97	97	97	97
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 is most recent data available from the MDH newborn screening program.

2. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2008**Field Note:**

data not available for 2008

3. Section Number: Form11_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.2	7.5	7	5.5	5.5
Annual Indicator	7.9	6.0	6.0	6.0	6.7
Numerator	97,554	75,476	75,600	75,450	85,000
Denominator	1,229,578	1,254,930	1,257,000	1,257,900	1,259,500
Data Source				2006 MN Health Access Survey	2009 MN Health Access Survey
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	6	6	6	5	5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data not available. Survey is not conducted every year.

2. Section Number: Form11_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective		29	28.5	28	28
Annual Indicator	29.7	30.4	29.9	30.4	29.9
Numerator	16,723	17,502	18,272	19,944	20,630
Denominator	56,307	57,609	61,109	65,607	68,997

Data Source

PedNSS

PedNSS

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	27	26.5	25	25	25
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. Section Number: Form11_Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2008

Field Note:

2008 data not yet available.

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective		13	13	13	13
Annual Indicator	14.9	13.6	15.0	11.6	
Numerator		9,427	10,303	7,865	
Denominator		69,367	68,911	67,563	
Data Source				MN PRAMS	
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	11	10	10	9	8
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2009**Field Note:**

Most recent PRAMS data available from CDC is 2008.

2. Section Number: Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 PRAMS data not yet available.

3. Section Number: Form11_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	8	9.8	11	8.5	7.2
Annual Indicator	11.7	8.9	9.7	7.4	
Numerator	44	33	36	27	
Denominator	375,522	372,719	371,683	366,844	

Data Source

MN Vital Statistics

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	7.1	7	6.9	6.8	6.8
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2009

Field Note:

Most recent data available is 2008.

2. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2008

Field Note:

2008 Population count not yet available.

3. **Section Number:** Form11_Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	82	86	87	84	87
Annual Indicator	84.1	83.2	85.6	85.5	
Numerator	702	674	718	693	
Denominator	835	810	839	811	

Data Source

MN Vital Statistics

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	87	88	88	89	89
Annual Indicator					
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 is the most recent data available from MN Vital Statistics.

2. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 hospital data not available yet.

3. Section Number: Form11_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	90.5	88	88	87	87
Annual Indicator	86.2	86.5	85.8	85.6	86.1
Numerator	58,125	59,928	60,085	60,180	60,500
Denominator	67,410	69,281	70,020	70,268	70,300

Data Source

MN Vital Statistics

Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	88	88	89	89	90
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

- 1.
- Section Number:**
- Form11_Performance Measure #18

Field Name: PM18**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 is most recent specific data available from MN Vital Statistics. Data listed for 2009 are general estimates based on overall MN trends.

- 2.
- Section Number:**
- Form11_Performance Measure #18

Field Name: PM18**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 natality data not yet available.

- 3.
- Section Number:**
- Form11_Performance Measure #18

Field Name: PM18**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: MN

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR

Proportion of counties that universally offer the Follow-Along Program, or an equivalent approved tracking program, to all children birth to age three.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		53	65	0.7	0.8
Annual Indicator	0.5	0.6	0.6	0.6	0.8
Numerator	46	55	52	55	67
Denominator	87	87	87	87	87
Data Source				Follow - Along Program	Follow-Along Program
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	0.8	0.8	0.8	0.8	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2008
Field Note:
Data source: FAP Data Download from the local agencies: status as of 12/31/2008

STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR

Percent of children enrolled in Medicaid who receive Early Periodic Screening, Diagnosis, and Treatment (EPSDT), also known as Child & Teen Checkup (CTC) in MN.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		64	65	66	69
Annual Indicator	63.8	63.8	65.5	68.1	69.5
Numerator	161,179	161,179	165,652	176,401	190,477
Denominator	252,584	252,584	253,051	258,938	274,047
Data Source				DHS	DHS
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	69	70	70	72	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes1. **Section Number:** Form11_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data is not yet available

STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR

Percent of sexually active ninth grade students who used a condom at last intercourse.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		70	71	71	71
Annual Indicator	69	69	70.8	70.8	70.8
Numerator			5,642	5,642	5,642
Denominator			7,971	7,971	7,971
Data Source				MN Student Survey	MN Student Survey
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>74</u>	<u>74</u>	<u>74</u>	<u>74</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

- Section Number:** Form11_State Performance Measure #3

Field Name: SM3**Row Name:****Column Name:****Year:** 2009**Field Note:**

The MN Student Survey is conducted every 3 years, and a new one is currently in progress. We will have updated data next year; however this measure is not likely to be carried over.

- Section Number:** Form11_State Performance Measure #3

Field Name: SM3**Row Name:****Column Name:****Year:** 2008**Field Note:**

Minnesota Student Survey is data source for this Performance Measure. It is conducted every 3 y ears. Next survey is scheduled for 2010.

STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR

Incidence of determined cases of child maltreatment by persons responsible for a child's care.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		6.1	6	5	4.5
Annual Indicator	6.2	5.4	4.9	4.3	
Numerator	7,983	6,998	6,227	5,404	
Denominator	1,286,894	1,286,594	1,259,456	1,258,163	
Data Source				MN Dept of Human Services	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>4.5</u>	<u>4</u>	<u>4</u>	<u>4</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are				
Numerator	view-only. If you are continuing any of these measures in the new needs assessment period, you may				
Denominator	establish objectives for those measures on Form 11 for the new needs assessment period.				

Field Level Notes**1. Section Number:** Form11_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data not available from DHS and will not be for another year.

2. Section Number: Form11_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data not yet available.

3. Section Number: Form11_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR

Percent of pregnancies that are intended.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		70	71	65	66
Annual Indicator	66.3	64.0	63.7	63.3	
Numerator	44,408	43,882	44,066	42,714	
Denominator	67,017	68,538	69,230	67,496	
Data Source	MN PRAMS survey				
Is the Data Provisional or Final?	Final				

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	66	67	67	67	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 PRAMS data not available until next year.

2. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 PRAMS data not yet available.

3. Section Number: Form11_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR

Percent of pregnant women screened for depression during routine prenatal care.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		83	84	86	86
Annual Indicator	85.4	85.6	88.9	89.9	
Numerator	56,690	59,389	61,744	61,028	
Denominator	66,396	69,413	69,422	67,889	
Data Source	MN PRAMS survey				
Is the Data Provisional or Final?	Final				

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>87</u>	<u>88</u>	<u>88</u>	<u>88</u>	<u></u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 PRAMS data not available from CDC yet.

2. Section Number: Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 PRAMS data not yet available.

3. Section Number: Form11_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR

The degree to which Title V programs enhance statewide capacity for a public health approach to mental health promotion and suicide prevention for children and adolescents.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		2	2	2	3
Annual Indicator	1	1	2	2	2
Numerator	1	1	2	2	2
Denominator	4	4	4	4	4
Data Source				MCSHN	MCSHN
Is the Data Provisional or Final?				Provisional	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>3</u>	<u>4</u>	<u>4</u>	<u>4</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

None

STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR

The ratio of the low birth weight (<2500 grams) rate for American Indian women and women of color to the low birth rate for white women.

<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008
Annual Performance Objective		1.2	1.2	1.1
Annual Indicator	1.4	1.3	1.4	1.4
Numerator	86	82	8.5	8.4
Denominator	60.1	61	6.2	5.8
Data Source				MN Vital Stats
Is the Data Provisional or Final?				Final

<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013
Annual Performance Objective	1	1	1	1
Annual Indicator				
Numerator				
Denominator				

Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes**1. Section Number:** Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data not available yet.

2. Section Number: Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 natality data not yet available.

3. Section Number: Form11_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR

Percent of Children and Youth with Special Health Care Needs (CYSHCN) with one or more unmet needs for specific health care services.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		14.1	10	12	12
Annual Indicator	14.1	12.9	12.9	12.9	12.9
Numerator	21,498	22,967	22,967	22,967	22,967
Denominator	152,468	177,669	177,669	177,669	177,669
Data Source				SLAITS	SLAITS
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>11</u>	<u>11</u>	<u>10</u>	<u>10</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may				
Numerator	establish objectives for those measures on Form 11 for the new needs assessment period.				
Denominator					

Field Level Notes**1. Section Number:** Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2008**Field Note:**

data source: National Survey of CSHCN 2005 / 06

2. Section Number: Form11_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR

Degree to which comprehensive mental health screening, evaluation, and treatment is provided to Children and Youth with Special Health Care Needs (CYSHCN).

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		7	8	9	12
Annual Indicator	6	7	9	11	15
Numerator	6	7	9	11	15
Denominator	20	20	20	20	20
Data Source				MCSHN staff	MCSHN staff
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	12	13	13	14	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

None

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: MN

Form Level Notes for Form 12

None

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	5.2	5	5	4.9	4.9
Annual Indicator	5.1	5.2	5.5	6.0	6.2
Numerator	363	381	407	433	450
Denominator	70,920	73,515	73,675	72,382	73,000
Data Source				MN Vital Stats	Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	6.1	6	6	5.5	5.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2009

Field Note:

2008 is the most recent hard data available. Our infant mortality rate is processed by the MN Center for Health Statistics and is typically 1 to 1-1/2 years behind the current date. 2009 data listed here are estimates.

2. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2008

Field Note:

2008 natality/mortality data not yet available.

3. Section Number: Form12_Outcome Measure 1

Field Name: OM01

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	1.6	2.2	2.2	2	1.8
Annual Indicator	2.6	2.1	2.5	2.8	2.7
Numerator	12.3	9.5	12.2	13.8	13
Denominator	4.7	4.6	4.8	4.9	4.9

Data Source

MN Vital Stats

Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	2.6	2.6	2.6	2.6	2.5

Annual Indicator**Numerator****Denominator**

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2009

Field Note:

2008 is most recent hard data available. 2009 data are estimates.

2. Section Number: Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2008

Field Note:

2008 natality/mortality data not yet available.

3. Section Number: Form12_Outcome Measure 2

Field Name: OM02

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	3	3	2.9	2.8	2.7
Annual Indicator	3.3	3.3	3.8	3.8	3.7
Numerator	232	243	278	275	270
Denominator	70,920	73,515	73,675	72,382	73,000

Data Source

MN Vital Stats

Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	3.7	3.6	3.6	3.5	3.5

Annual Indicator**Numerator****Denominator**

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 is the most recent hard data available. 2009 data are estimates.

2. Section Number: Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 natality/mortality data not yet available.

3. Section Number: Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	1.3	1.3	1.2	1.1	1.1
Annual Indicator	1.8	1.9	1.8	2.2	1.9
Numerator	131	138	129	158	140
Denominator	70,920	73,515	73,675	72,382	73,000
Data Source				MN Vital Stats	Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	1.9	1.9	1.9	1.8	1.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are
 not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2009**Field Note:**

2008 are most recent hard data available. 2009 data are estimates.

2. Section Number: Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 natality/mortality data not yet available.

3. Section Number: Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	5.1	4.5	4.4	4.4	4.3
Annual Indicator	4.6	4.4	5.0	4.8	4.7
Numerator	327	323	370	349	350
Denominator	71,059	73,866	73,818	72,527	75,000
Data Source				MN Vital Stats	Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	4.7	4.6	4.6	4.5	4.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2009

Field Note:

2008 data are most recent data available. 2009 data are estimates.

2. Section Number: Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2008

Field Note:

2008 natality/mortality data not yet available.

3. Section Number: Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data

	2005	2006	2007	2008	2009
Annual Performance Objective	16.8	17.4	17.2	15	15
Annual Indicator	15.3	15.7	15.3	17.3	17.7
Numerator	143	151	147	166	170
Denominator	936,166	960,960	962,310	962,034	962,000

Data Source

MN Vital Stats

Estimates

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2010	2011	2012	2013	2014
Annual Performance Objective	17.5	17.5	17	17	17

Annual Indicator**Numerator****Denominator**

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes**1. Section Number:** Form12_Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2008

Field Note:

2008 mortality data not yet available.

2. Section Number: Form12_Outcome Measure 6

Field Name: OM06

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: MN

Form Level Notes for Form 12

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: MN

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

2

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

1

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

1

6. Family members of diverse cultures are involved in all of the above activities.

2

Total Score: 11

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: MN FY: 2011

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Improve Birth Outcomes
2. Improve the Health of Children and Adolescents
3. Promote Optimal Mental Health
4. Reduce Child Injury and Death
5. Assure Quality Screening, Identification and Intervention
6. Improve Access to Quality Health Care and Needed Services
7. Assure Healthy Youth Development
- 8.
- 9.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: MN

APPLICATION YEAR: 2011

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	National Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>18</u>	Addressing barriers to first trimester care, increase capacity of providers, raise standard of practice for early care.	Early and adequate care will reduce the risk of poor birth outcomes. Maternal conditions need to be addressed early.	To be determined.
2.	National Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>13</u>	Assistance on impact of federal health reform on MN mothers, infants and children.	New federal health reform is expansive. As health reform moves forward, Minnesota may need assistance in communicating the impact of health reform on the MCH community and identifying the changes that impact families.	To be determined.
3.	National Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>5</u>	Guidance on autism/other DD collaborative learning session curricula and support materials.	This is an emerging issues in Minnesota. Assistance may be needed to understand other state's activities related ton autism and DD learning collaboratives.	CDC/MCHB
4.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Assitance with planning for interoperability of children's health information systems.	Data privacy issues have created challenges in developing data systems	Minnesota has already started to address this issue.
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue			

	categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: MN

SP(Reporting Year) # 1

PERFORMANCE MEASURE:

Proportion of counties that universally offer the Follow-Along Program, or an equivalent approved tracking program, to all children birth to age three.

STATUS:

Active

GOAL

Improve early identification of and participation in early intervention for Children with Special Health Care Needs (CSHCN), birth to three years.

DEFINITION

This performance measure was designed to track children from the time of birth to age three for the purpose of identifying those who may have special health care needs.

Numerator:

Number of counties that implement the Follow-Along Program, or an equivalent approved tracking system, universally.

Denominator:

Total number of counties in Minnesota (N=87)

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

Not applicable to this measure.

DATA SOURCES AND DATA ISSUES

Data Sources: MN Follow-Along Program; Local Public Health data (counties)

SIGNIFICANCE

Early identification, screening and referral systems identify children's strengths as well as their needs. These systems can maximize healthy child development and minimize adverse health, social and emotional incidents. Universal screening of all children, birth to age three—regardless of perceived risk factors—promotes thorough identification of those with special health care needs and subsequent provision of intervention services to children who are eligible under Part C of Individuals with Disabilities Education Act (IDEA).

SP(Reporting Year) # 2

PERFORMANCE MEASURE:

Percent of children enrolled in Medicaid who receive Early Periodic Screening, Diagnosis, and Treatment (EPSDT), also known as Child & Teen Checkup (CTC) in MN.

STATUS:

Active

GOAL

Assure that children and adolescents receive comprehensive health care.

DEFINITION

This measure addresses preventive and comprehensive health care for children and adolescents receiving Medicaid. The measure is the percent of children who receive well child visits according to the state's EPSDT periodicity schedule. This measure does not include dental screening or health care services.

Numerator:

Number of Minnesota children enrolled in Medicaid who receive one or more EPSDT in any given year.

Denominator:

All Minnesota children enrolled in Medicaid who should have received at least one visit in any given year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Not applicable to this measure.

DATA SOURCES AND DATA ISSUES

Data Source: MN Dept. of Human Services (MDHS) Data Issues: These data are limited to children and adolescents receiving Medicaid. Estimates must be made for the larger child and adolescent population.

SIGNIFICANCE

Well-child care reduces long-term costs by encompassing a variety of health promoting/disease preventing services and by providing opportunities to detect and treat health conditions early. Within the Medicaid population, as in the entire population of children and adolescents in Minnesota, incidence of chronic disease is growing—particularly childhood obesity, diabetes, asthma, mental health disorders, and injuries. Early detection and treatment may assist in reversing this trend.

PERFORMANCE MEASURE:

Percent of sexually active ninth grade students who used a condom at last intercourse.

STATUS:

Active

GOAL

Prevent teen pregnancy and sexually transmitted infections(STIs).

DEFINITION

This measure seeks to monitor the prevention of teen pregnancy and STIs by determining (1) the number of sexually active ninth grade students and (2) the percentage of those students who used a condom at last intercourse.

Numerator:

Number of sexually active ninth grade students reporting on the Minnesota Student Survey (MSS) in any given year that they used a condom at last intercourse.

Denominator:

Total number of sexually active ninth grade students responding to the MSS in any given year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

#9-7 (Reduce pregnancies among adolescent females).

#25-11 (Increase the proportion of adolescents who abstain from sexual intercourse or use condoms if sexually active).

DATA SOURCES AND DATA ISSUES

Data Source: MSS Data Issues: MSS is administered by the MN Dept. of Education (MDE) in most Minnesota public schools every three years beginning in sixth grade. While this system provides relative consistency of data across grade levels (6th and 9th graders take survey again in 9th and 12th grades), data are unavailable during intervening years.

SIGNIFICANCE

Teen pregnancy has been steadily decreasing in recent years but has reached a plateau in Minnesota, while STIs have continued to increase among females and among adolescents and young adults, with significant disparities among some racial/ethnic groups. Tracking condom use by high school students is one method of targeting positive interventions for sexually active teens in both of these critical areas.

PERFORMANCE MEASURE:

Incidence of determined cases of child maltreatment by persons responsible for a child's care.

STATUS:

Active

GOAL

Prevent child abuse and neglect.

DEFINITION

For our purposes, a "case" is defined as a child maltreatment report which met the initial statutory screening criteria, was handled using "traditional assessment," and resulted in a "determined" case. MN Counties are increasingly adopting a less conventional and proscribed investigative method called "alternative assessment" wherein a definite determination of abuse/neglect is not made. Instead, families are provided with "wrap around" services that address both their strengths and weaknesses. Because a determination of abuse is not made in these cases, they are not included in the count of child maltreatment cases in this measure.

Numerator:

Number of new determined child maltreatment cases, 17 years and under, for any given year in Minnesota.

Denominator:

Total number of Minnesota children, 17 years and under, for any given year.

Units: 1000 **Text:** Rate**HEALTHY PEOPLE 2010 OBJECTIVE**

#15-33 (Reduce maltreatment and maltreatment fatalities of children)

DATA SOURCES AND DATA ISSUES

Data Sources: MN Department of Human Services (MDHS); MN Department of Health (MDH), Center for Vital Statistics. Data Issues: Abuse and neglect are traditionally underreported; therefore, both incidence and prevalence are usually underestimated. While it might be advantageous to track the number of children allegedly maltreated rather than the number of maltreatment cases, many children would be counted more than once due to the enormous volume of child maltreatment reports received by MDHS. A "case" is a more consistent measure because it consolidates all of the reports received on a particular family or household, even though that family/household may contain more than one child.

SIGNIFICANCE

Child maltreatment is among the most prevalent and far-reaching forms of violence in Minnesota. All four maltreatment types (neglect, physical abuse, sexual abuse, mental/emotional injury) are represented here. Further, child and adolescent maltreatment often precedes adult violence and substance misuse/addiction as the abused child grows older.

PERFORMANCE MEASURE:

Percent of pregnancies that are intended.

STATUS:

Active

GOAL

To promote planned pregnancies and child spacing among women and their families.

DEFINITION

Adopting a more positive approach, this performance measure is the reverse of our previous measure: Percentage of pregnancies that are unintended (SPM #05, 2000-2005). It also captures the aspect of child spacing by planning pregnancies that have optimal spacing between them.

Numerator:

Number of women per year responding on the annual Minnesota Pregnancy Risk Assessment Monitoring System (PRAMS) survey that they became pregnant intentionally.

Denominator:

Total number of women responding to the annual PRAMS survey each year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

#9-1 (Increase proportion of pregnancies that are intended.)

DATA SOURCES AND DATA ISSUES

Source: Annual Minnesota PRAMS survey. Data Issues: This measure depends upon accuracy of self-report procedure as well as response rate to the annual survey. This data has been weighted according to the uniform procedure established by the Centers for Disease Control (CDC) for all states and territories participating in PRAMS. For Minnesota, this is particularly important as we intentionally oversampled two minority populations: American Indians and Blacks. The weighting procedure assures that the responses of these persons will be given weight equal to their actual proportional representation in the population, rather than to their increased numbers in the PRAMS survey.

SIGNIFICANCE

Pregnancies which are intended and/or planned will likely result in improved health outcomes, lower occurrence of perinatal/postpartum depression, fewer abortions, decreased child maltreatment and other negative outcomes for pregnant women, infants and children.

PERFORMANCE MEASURE:

Percent of pregnant women screened for depression during routine prenatal care.

STATUS:

Active

GOAL

To assure that screening for perinatal depression becomes a standard component of early and adequate prenatal care for women.

DEFINITION

This performance measure was designed to capture an element of early and adequate prenatal care that is not currently being measured in Minnesota.

Numerator:

Number of women per year responding on the Minnesota Pregnancy Risk Assessment Monitoring System (PRAMS) survey that they talked with a doctor, nurse or other health care provider about postpartum depression.

Denominator:

Total number of women responding to the annual PRAMS survey each year.

Units: 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

#18-6 (Increase number of persons seen in primary health care who receive mental health screening & assessment); #16-5 (Reduce maternal illness & complications due to pregnancy); #16-5 (Early & adequate prenatal care)

DATA SOURCES AND DATA ISSUES

Source: Annual Minnesota PRAMS survey. Data Issues: This measure depends upon accuracy of self-report procedure as well as response rate to the ongoing annual survey. This data has been weighted according to the uniform procedure established by the Centers for Disease Control (CDC) for all states and territories participating in PRAMS. For Minnesota, this is particularly important as we intentionally oversampled two minority populations: American Indians and Blacks. The weighting procedure assures that the responses of these persons will be given weight equal to their actual proportional representation in the population, rather than to their increased numbers in the PRAMS survey.

SIGNIFICANCE

Perinatal depression is a critical element of care for pregnant women, in terms of both mother's and child's well-being. Currently it is not routinely addressed in Minnesota. Screening is the initial step in determining whether treatment or intervention may be appropriate.

PERFORMANCE MEASURE:

The degree to which Title V programs enhance statewide capacity for a public health approach to mental health promotion and suicide prevention for children and adolescents.

STATUS:

Active

GOAL

Promote mental health for children and adolescents, including suicide prevention.

DEFINITION

This is a process goal to be accomplished in four stages. Attainment of this goal will be evidenced by the development and implementation of a statewide plan to build capacity for the role of public health in mental health promotion and suicide prevention for children and adolescents.

Numerator:

Current stage of activity, with stages being: Stage 1—During the first year Title V staff will work internally to: (a) determine the extent and current status of all mental health activities across all divisions at MDH; (b) develop a comprehensive framework which includes the location and role of mental health within the Department (i.e., where mental health “fits” at MDH); (c) draft a mission statement which outlines our vision of and commitment to mental health promotion and suicide prevention throughout the state, focusing on the child and adolescent population. Stage 2—During years 2-3 Title V staff will work with local public health (LPH) agencies to: (a) determine the additional capacity and training needs of LPH nurses, health educators and other staff regarding mental health promotion and suicide prevention; and (b) support development of needed resources and capacity for our LPH constituents.

Denominator:

Number of stages possible, with final stages being: Stage 3—Based on this assessment MDH will draft a statewide mental health promotion/ suicide prevention training plan, together with an evaluation component, in year four. Stage 4—During year 5, MDH will begin implementing its statewide training plan, accompanied by evaluation and other data collection related to the plan.

Units: 4 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

#18-7 (Increase the proportion of children with mental health problems who receive treatment)

#18-2 (Reduce the rate of suicide attempts by adolescents).

DATA SOURCES AND DATA ISSUES

Data Source: Minnesota Student Survey (MSS); ASQ (Ages and States Questionnaire); Social Emotional (SE) component; Local county health boards (CHBs); MDH home visiting data; Data derived from the statewide training plan itself. Also, there will be multiple sources of qualitative data. Data Issues: At the present time we have no baseline data regarding the prevalence or incidence of mental health issues in Minnesota, largely because mental health has not been viewed as a public health priority until recently. Quantitative data on mental health is difficult to acquire, as most data relates to mental illness, but we will continue our efforts to gather both qualitative and quantitative data on mental health.

SIGNIFICANCE

Mental disorders were the sixth leading cause of emergency room visits among 5-19 year olds in Minnesota and the leading cause of hospitalization for 5-14 year olds in 2001. From 1998-2002 suicide was the third and second leading cause of death for 10-14 year olds and 15-19 year olds, respectively. Today's numbers are very similar. Public Health Title V programs need to adopt a proactive stance to address these issues by advancing a statewide mental health promotion plan.

SP(Reporting Year) # 8

PERFORMANCE MEASURE:

The ratio of the low birth weight (<2500 grams) rate for American Indian women and women of color to the low birth rate for white women.

STATUS:

Active

GOAL

To eliminate racial and ethnic health disparities impacting pregnant women, mothers and infants.

DEFINITION

Birth weight is a prominent and reliable indicator of health disparities between white and non-white women in Minnesota.

Numerator:

Rate of low birth weight for American Indian women and women of color per 1,000 live births.

Denominator:

Rate of low birth weight for white women per 1,000 live births.

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

#16-10 (Reduce low birth weight and very low birth weight.)

DATA SOURCES AND DATA ISSUES

Source: State of Minnesota Vital Statistics birth records. Data Issues: This measure depends upon the accuracy of individual birth records.

SIGNIFICANCE

There are substantial health disparities for pregnant women, mothers and infants in Minnesota. Many of these disparities are masked by the excellent health outcomes and very high proportion of our white population. Birth weight outcomes are a key indicator of such disparities and a crucial area for improvement. Although very low birth weight infants (VLBW; <1500 grams) are more seriously ill, more likely to die, and incur the most significant short and long term health and education costs, public health has limited ability to affect VLBW which is more in the domain of the maternal and fetal medical care system. Public health can, however, impact low birth weight rates by encouraging early and regular prenatal care, enrollment in WIC, supporting smoking cessation during pregnancy, teaching signs of early labor, assessing for and helping pregnant women deal with stress, and educating about healthy birth intervals.

SP(Reporting Year) # 9

PERFORMANCE MEASURE:

Percent of Children and Youth with Special Health Care Needs (CYSHCN) with one or more unmet needs for specific health care services.

STATUS:

Active

GOAL

Improve access for CYSHCN to comprehensive care, including specialty services and oral health.

DEFINITION

This measure will identify the percent of CYSHCN who have not received all needed oral health or specialty medical services.

Numerator:

Number of CYSHCN with one or more unmet service needs.

Denominator:

Total number of identified CYSHCN in Minnesota.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

N/A

DATA SOURCES AND DATA ISSUES

Data Sources: State and Local Area Integrated Telephone Survey (SLAITS), CYSHCN version. Data issues: SLAITS data not available every year.

SIGNIFICANCE

CYSHCN often have multiple disabilities and service needs cutting across several areas. Thus it is critical to have access to a variety of specialized services, as well as oral health care. Of those children in Minnesota who needed specialty services in 2001, nearly 23,000 (14%) had one or more unmet needs, placing MN last in the Upper Midwest in meeting specialized service needs for CYSHCN.

PERFORMANCE MEASURE:

Degree to which comprehensive mental health screening, evaluation, and treatment is provided to Children and Youth with Special Health Care Needs (CYSHCN).

STATUS:

Active

GOAL

Improve access to comprehensive mental health screening, evaluation, and treatment for CYSHCN.

DEFINITION

This specially constructed composite measure was designed to capture three basic mental health identification and service areas: screening, evaluation, and treatment. The scale contained within the measure also has five sub-areas that can be summed across areas for a total score.

Numerator:

N/A

Denominator:

N/A Units: Scale contains a maximum of 20 units or possible points. Text: Direction and degree of change on this scale (-4 to +4) will be calculated for each of the five sub-scales and aggregated to form a composite number. Individual components, as well as total scores, will be tracked across the years. This process will permit each sub-scale to be assessed individually, leading to greater identification of areas attaining or needing improvement.

Units: 20 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

#18-7 (Increase the proportion of children with mental health problems who receive treatment.)

DATA SOURCES AND DATA ISSUES

Data sources: Local Development and Behavior Clinics (DBC) process evaluation; MN Follow-Along Program (FAP) reports; MN Dept. of Human Services (MDHS), Children's Mental Health data; State & Local Area Integrated Telephone Survey (SLAITS), CYSHCN survey; DBC family survey. Data Issues: Specially constructed scale not standardized. SLAITS data not available every year.

SIGNIFICANCE

Anxiety, depression (including suicidal thoughts) and other mental disorders often occur among CYSHCN. In addition, CYSHCN are highly vulnerable to maltreatment, including neglect and physical, sexual, and mental abuse. Early identification of and intervention in mental health issues are critical in this population.

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: MN

Form Level Notes for Form 17

MN's SCHIP program has less than 100 children enrolled

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>25.9</u>	<u>27.5</u>	<u>31.2</u>	<u>21.4</u>	<u> </u>
Numerator	<u>846</u>	<u>885</u>	<u>1,046</u>	<u>746</u>	<u> </u>
Denominator	<u>326,227</u>	<u>322,047</u>	<u>335,694</u>	<u>347,835</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2009

Field Note:

2008 is the most recent data available. We will not have 2009 hospital-based data for rates of children with asthma until early 2011.

2. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2008

Field Note:

2008 data not yet available.

3. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>87.0</u>	<u>85.1</u>	<u>87.0</u>	<u>86.9</u>	<u>87.1</u>
Numerator	<u>48,467</u>	<u>26,114</u>	<u>27,667</u>	<u>28,006</u>	<u>28,267</u>
Denominator	<u>55,707</u>	<u>30,669</u>	<u>31,790</u>	<u>32,232</u>	<u>32,450</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

None

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

Annual Indicator Data					
	2005	2006	2007	2008	2009
Annual Indicator	0	0	0	0	0
Numerator					
Denominator					
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2009

Field Note:

There is no SCHIP program in MN at the present time.

2. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2008

Field Note:

MN does not participate in this program.

3. **Section Number:** Form17_Health Systems Capacity Indicator #03

Field Name: HSC03

Row Name:

Column Name:

Year: 2007

Field Note:

Historically there are less than 100 children enrolled on SCHIP. Eligibility criteria is children under two whose family income is between 275 FPG and 280 FPG.

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	<u>Annual Indicator Data</u>				
	2005	2006	2007	2008	2009
Annual Indicator	77.6	77.9	80.3	82.5	
Numerator	54,922	57,101	59,001	59,566	
Denominator	70,750	73,300	73,477	72,166	

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2009

Field Note:

2008 is the most recent data which we have for this measure. The 2009 data will not be available until earlyh 2011.

2. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2008

Field Note:

2008 natality data not yet available.

3. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH SYSTEMS CAPACITY MEASURE # 07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>79.3</u>	<u>79.2</u>	<u>77.6</u>	<u>89.0</u>	<u>66.2</u>
Numerator	<u>361,695</u>	<u>364,416</u>	<u>364,189</u>	<u>367,309</u>	<u>345,850</u>
Denominator	<u>456,000</u>	<u>460,000</u>	<u>469,436</u>	<u>412,709</u>	<u>522,435</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #07A

Field Name: HSC07A

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data is not yet available

HEALTH SYSTEMS CAPACITY MEASURE # 07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>48.5</u>	<u>48.2</u>	<u>48.8</u>	<u>51.1</u>	<u>52.4</u>
Numerator	<u>35,728</u>	<u>36,160</u>	<u>36,814</u>	<u>39,448</u>	<u>43,468</u>
Denominator	<u>73,680</u>	<u>75,058</u>	<u>75,490</u>	<u>77,167</u>	<u>82,920</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

None

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
Numerator	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Denominator	<u>9,046</u>	<u>9,541</u>	<u>10,264</u>	<u>11,337</u>	<u>10,925</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2009

Field Note:

MCYSHN does not pay for direct services. Children who are receiving SSI financially qualify for MN Medical Assistance.

2. **Section Number:** Form17_Health Systems Capacity Indicator #08

Field Name: HSC08

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: MN

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2008	Matching data files	<u>7.7</u>	<u>5.6</u>	<u>6.4</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Matching data files	<u>5</u>	<u>4</u>	<u>4.4</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2008	Matching data files	<u>76</u>	<u>91.6</u>	<u>85.6</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2008	Matching data files	<u>78.5</u>	<u>85.1</u>	<u>82.5</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: MN

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2009	<div style="text-align: right;">275</div>
b) <i>Medicaid Children</i> (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">1</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">2</div>) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">2</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">18</div>) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">19</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">20</div>)	2009	<div style="text-align: right;">275</div> <div style="text-align: right;">150</div> <div style="text-align: right;">100</div>
c) <i>Pregnant Women</i>	2009	<div style="text-align: right;">275</div>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: MN

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2009	280
b) <i>Medicaid Children</i> (Age range <u> </u> 1 to <u> </u> 2) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2009	280 _____ _____
c) <i>Pregnant Women</i>	2009	280

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

None

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: MN

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	No
Annual linkage of birth certificates and WIC eligibility files	2	No
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: MN

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	1	No
Other: Minnesota Student Survey	3	No

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: MN

Form Level Notes for Form 20

Our Vital Statistics data, which is processed by the MN Center for Health Statistics, is typically available within 1 to 1-1/2 years after the close of any given year. Thus, 2009 data should be available early in 2011.

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	2005	2006	<u>Annual Indicator Data</u>		
			2007	2008	2009
Annual Indicator	6.6	6.6	6.8	6.4	
Numerator	4,685	4,709	4,982	4,655	
Denominator	70,899	71,344	73,651	72,356	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are typically 1 to 1-1/2 years behind any given calendar year. Thus, 2009 data will be available early in 2011.

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2008

Field Note:

2008 natality data not yet available.

- Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>4.9</u>	<u>4.9</u>	<u>5.0</u>	<u>4.7</u>	<u> </u>
Numerator	<u>3,339</u>	<u>3,470</u>	<u>3,543</u>	<u>3,272</u>	<u> </u>
Denominator	<u>68,402</u>	<u>70,816</u>	<u>71,102</u>	<u>69,793</u>	<u> </u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Field Level Notes

- Section Number:** Form20_Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2009
Field Note:
 Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. Thus, 2009 data will be available early in 2011.
- Section Number:** Form20_Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2008
Field Note:
 2008 natality data not yet available.
- Section Number:** Form20_Health Status Indicator #01B
Field Name: HSI01B
Row Name:
Column Name:
Year: 2007
Field Note:
 2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	1.2	1.2	1.2	1.2	
Numerator	884	856	898	871	
Denominator	70,899	71,344	73,651	72,356	
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are typically 1 to 1/12 years behind the current year. We expect that 2009 data will be available early in 2011.

2. Section Number: Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 natality data not yet available.

3. Section Number: Form20_Health Status Indicator #02A**Field Name:** HSI02A**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>0.9</u>	<u>0.9</u>	<u>0.8</u>	<u>0.8</u>	<u> </u>
Numerator	<u>636</u>	<u>632</u>	<u>599</u>	<u>587</u>	<u> </u>
Denominator	<u>68,402</u>	<u>70,416</u>	<u>71,002</u>	<u>69,793</u>	<u> </u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

Field Level Notes**1. Section Number:** Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Our health status indicators, which are processed by the MN Center for Health Statistics, are typically 1 to 1-1/2 years behind the current year. We expect that 2009 data will be available early in 2011.

2. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 natality data not yet available.

3. Section Number: Form20_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>7.4</u>	<u>6.9</u>	<u>7.1</u>	<u>7.1</u>	<u> </u>
Numerator	<u>74</u>	<u>71</u>	<u>73</u>	<u>74</u>	<u> </u>
Denominator	<u>1,005,572</u>	<u>1,030,354</u>	<u>1,035,153</u>	<u>1,035,562</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

- Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. We expect the 2009 data to be available early in 2011.

- Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2008

Field Note:

2008 injury data not available yet.

- Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>2.4</u>	<u>2.2</u>	<u>1.9</u>	<u>2.4</u>	<u> </u>
Numerator	<u>24</u>	<u>23</u>	<u>20</u>	<u>25</u>	<u> </u>
Denominator	<u>1,005,572</u>	<u>1,030,354</u>	<u>1,035,153</u>	<u>1,035,562</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. We expect 2009 data to be available early in 2011.

2. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2008

Field Note:

2008 injury data not available yet.

3. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2005	2006	Annual Indicator Data		2009
			2007	2008	
Annual Indicator	18.8	20.5	19.4	12.0	
Numerator	142	153	142	87	
Denominator	757,328	746,654	732,526	726,371	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current year. We expect 2009 data to be available early in 2011.

2. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2008

Field Note:

2008 injury data not available yet.

3. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2005	2006	<u>Annual Indicator Data</u>		
			2007	2008	2009
Annual Indicator	213.7	188.3	193.0	194.0	
Numerator	2,149	1,940	1,998	2,009	
Denominator	1,005,572	1,030,354	1,035,153	1,035,562	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current date. We expect 2009 data to be available early in 2011.

2. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2008

Field Note:

2008 inpatient hospital discharge data will not be available until after 1/1/10.

3. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>18.3</u>	<u>14.2</u>	<u>22.8</u>	<u>12.6</u>	<u> </u>
Numerator	<u>184</u>	<u>146</u>	<u>236</u>	<u>130</u>	<u> </u>
Denominator	<u>1,005,572</u>	<u>1,030,354</u>	<u>1,035,153</u>	<u>1,035,562</u>	<u> </u>

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current date. We expect 2009 data to be available early in 2011.

2. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2008

Field Note:

2008 inpatient hospital discharge data (from hospitals participating in the MN Hospital Association) will not be available until at least January 2010.

3. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2005	2006	Annual Indicator Data		
			2007	2008	2009
Annual Indicator	92.6	80.9	108.9	81.4	
Numerator	701	604	798	591	
Denominator	757,328	746,654	732,526	726,371	

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2009

Field Note:

Our health status indicators, which are processed by the MN Center for Health Statistics, are usually 1 to 1-1/2 years behind the current date. We expect 2009 data to be available early in 2011.

2. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2008

Field Note:

2008 inpatient hospital discharge data (obtained from hospitals participating in MN Hospital Association) will not be available at least until after January 1, 2010.

3. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2007

Field Note:

2007 data not yet available

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

		Annual Indicator Data			
	2005	2006	2007	2008	2009
Annual Indicator	<u>17.1</u>	<u>17.5</u>	<u>18.3</u>	<u>19.6</u>	<u>19.8</u>
Numerator	<u>3,118</u>	<u>3,205</u>	<u>3,347</u>	<u>3,578</u>	<u>3,628</u>
Denominator	<u>182,828</u>	<u>182,828</u>	<u>182,828</u>	<u>182,828</u>	<u>182,828</u>
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

None

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	<u>6.2</u>	<u>6.5</u>	<u>6.8</u>	<u>7.2</u>	<u>7.0</u>
Numerator	<u>5,603</u>	<u>5,868</u>	<u>6,118</u>	<u>6,462</u>	<u>6,324</u>
Denominator	<u>899,814</u>	<u>899,814</u>	<u>899,814</u>	<u>899,814</u>	<u>899,814</u>
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

None

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	73,528	62,797	5,650	1,348	3,733	0	0	0
Children 1 through 4	284,943	231,885	28,621	7,583	16,854	0	0	0
Children 5 through 9	335,904	285,093	26,789	6,611	17,411	0	0	0
Children 10 through 14	341,187	293,281	24,709	5,718	17,479	0	0	0
Children 15 through 19	366,844	319,867	24,468	6,464	16,045	0	0	0
Children 20 through 24	359,527	318,323	21,496	6,170	13,538	0	0	0
Children 0 through 24	1,761,933	1,511,246	131,733	33,894	85,060	0	0	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	67,223	6,305	0
Children 1 through 4	258,392	26,551	0
Children 5 through 9	310,881	25,023	0
Children 10 through 14	321,140	20,047	0
Children 15 through 19	350,436	16,408	0
Children 20 through 24	343,926	15,601	0
Children 0 through 24	1,651,998	109,935	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	65	11	24	6	13	0	0	11
Women 15 through 17	1,377	643	288	110	127	0	0	209
Women 18 through 19	3,501	2,079	569	216	231	0	0	406
Women 20 through 34	56,999	43,103	5,068	1,133	3,847	0	0	3,848
Women 35 or older	10,439	8,133	879	90	771	0	0	566
Women of all ages	72,381	53,969	6,828	1,555	4,989	0	0	5,040

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	47	17	1
Women 15 through 17	1,081	269	27
Women 18 through 19	2,961	511	29
Women 20 through 34	52,002	4,359	638
Women 35 or older	9,721	567	151
Women of all ages	65,812	5,723	846

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	433	266	94	18	25	0	0	30
Children 1 through 4	80	55	14	3	2	0	0	6
Children 5 through 9	41	26	7	3	1	0	0	4
Children 10 through 14	45	34	6	3	1	0	0	1
Children 15 through 19	132	101	16	5	5	0	0	5
Children 20 through 24	244	184	31	10	11	0	0	8
Children 0 through 24	975	666	168	42	45	0	0	54

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	387	41	5
Children 1 through 4	71	9	0
Children 5 through 9	35	6	0
Children 10 through 14	42	3	0
Children 15 through 19	123	8	1
Children 20 through 24	234	9	1
Children 0 through 24	892	76	7

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Final

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	1,402,406	1,192,923	110,237	27,724	71,522	0	0	0	2008
Percent in household headed by single parent	33.0	20.0	62.0	0.0	29.0	0.0	0.0	0.0	2007
Percent in TANF (Grant) families	5.1	2.2	27.4	34.6	9.7	0.0	8.6	15.8	2008
Number enrolled in Medicaid	430,811	244,476	86,910	18,209	29,990	0	17,249	33,977	2009
Number enrolled in SCHIP	0	0	0	0	0	0	0	0	2009
Number living in foster home care	13,755	6,839	2,950	1,798	329	4	1,220	615	2008
Number enrolled in food stamp program	236,047	115,141	67,645	13,897	18,145	0	12,385	8,834	2009
Number enrolled in WIC	139,405	80,011	28,825	5,602	11,962	220	12,782	3	2009
Rate (per 100,000) of juvenile crime arrests	3,368.0	2,358.0	13,990.0	6,915.0	2,461.0	0.0	0.0	0.0	2008
Percentage of high school drop-outs (grade 9 through 12)	6.3	4.1	13.1	20.2	6.6	0.0	0.0	0.0	2008

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,308,072	94,334	0	2008
Percent in household headed by single parent	0.0	41.0	0.0	2007
Percent in TANF (Grant) families	11.3	4.7	0.0	2008
Number enrolled in Medicaid	376,213	54,598	0	2009
Number enrolled in SCHIP	0	0	0	2009
Number living in foster home care	88,366	1,250	0	2008
Number enrolled in food stamp program	208,804	27,243	0	2009
Number enrolled in WIC	139,405	33,245	0	2009
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	2008
Percentage of high school drop-outs (grade 9 through 12)	0.0	16.2	0.0	2008

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	867,362
Living in urban areas	351,571
Living in rural areas	35,711
Living in frontier areas	0
Total - all children 0 through 19	387,282

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	5,090,468.0
Percent Below: 50% of poverty	4.1
100% of poverty	14.5
200% of poverty	16.0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MN

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	<u>1,254,644.0</u>
Percent Below: 50% of poverty	<u>4.9</u>
100% of poverty	<u>11.2</u>
200% of poverty	<u>28.6</u>

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2011
Field Note:
Sample size for American Indian population was too small to calculate a valid percentage.
2. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2011
Field Note:
MN does not have an active SCHIP program at this time.
3. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2011
Field Note:
Age range: 0 to 18 years.
4. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2011
Field Note:
MN does not have an active SCHIP program in the state at this time.
5. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2011
Field Note:
It is not possible to separate out Hispanic juvenile crime from all other juvenile crime arrests at this time. The MN Dept. of Public Safety is upgrading their juvenile crime data system, and it is likely that we will be able to calculate this measure next year.
6. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2011
Field Note:
It is not possible to calculate an accurate figure for non-Hispanic high school dropouts without double-counting some Hispanic children. The MN Dept. of Education web site is currently being revised, and next year we will likely be able to calculate this measure fully.
7. **Section Number:** Form21_Indicator 10
Field Name: Metropolitan
Row Name: Living in metropolitan areas
Column Name:
Year: 2011
Field Note:
We are unable to obtain data for children who are age 18 or beyond. Thus, data for this indicator are based on children from birth up to 18 years, or 0 - 18 years.
8. **Section Number:** Form21_Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2011
Field Note:
We are unable to obtain data for children who have reached the age of 18 and beyond. These data apply to children from birth up to age 18, or 0-18 years of age.
9. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2011
Field Note:
Age range: 0 - 18 years

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: MN

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of women who did not consume alcohol during the last three months of pregnancy.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	<input type="text"/>				
Is the Data Provisional or Final?	<input type="text"/>				

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 2 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of children enrolled in Medicaid who receive at least one recommended Child and Teen Checkup (C&TC) visit (EPSDT is known as C&TC in Minnesota).

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator	While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.				
Denominator					

Field Level Notes

None

STATE PERFORMANCE MEASURE # 3 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of MN children birth to 5 enrolled in Medicaid who received a mental health screening using a standardized instrument as part of their C&TC visit (EPSDT is known as C&TC in Minnesota).

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 4 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Rate of child maltreatment cases.

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 5 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

The number of children enrolled in the Follow-Along Program.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 6 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of children under the age of one year participating in early intervention through Part C of the Individuals with Disabilities Education Act.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 7 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of participants in Minnesota's family home visiting program referred to community resources that received a family home visitor follow-up on that referral.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 8 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of children and youth with special health care needs who have received all needed health care services.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 9 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percentage of families of children age 0-17 that report costs not covered by insurance are usually or always reasonable.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 10 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

By 2013, in collaboration with other state agencies, identify a state performance measure and benchmark to monitor positive youth development in Minnesota.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

Field Level Notes

None

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: MN

Form Level Notes for Form 12

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: MN

SP(New for Needs Assessment cycle 2011-2015) # 1

PERFORMANCE MEASURE:	Percentage of women who did not consume alcohol during the last three months of pregnancy.
STATUS:	Active
GOAL	Increase the number of women who do not consume any alcohol during their pregnancy.
DEFINITION	<p>This measure addresses the state priority need to Improve Healthy Birth Outcomes. This measure was created to address both short and long-term goals. Eliminating alcohol consumption during the last three months of pregnancy is will promote the health and well-being of both the mother and her fetus. A healthy pregnancy contributes to greater likelihood of improved birth outcomes.</p> <p>Numerator: Number of women responding to Question #36a on the MN 2010 PRAMS Survey: "During the last 3 months of your pregnancy, how many alcoholic drinks did you have in average week?" with the last option ("I didn't drink then"), indicating they did not consume alcohol during the last three months of their pregnancy in any given year.</p> <p>Denominator: Total number of women participating in the ongoing MN PRAMS Survey during any given year who answered this question.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>16-17 Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women. (Goal for alcohol abstinence = 94%)</p> <p>16-18 Reduce the occurrence of fetal alcohol syndrome.</p>
DATA SOURCES AND DATA ISSUES	Data Sources: Annual MN PRAMS Survey (2010 through 2014) Data Issues: Alcohol is a key element for women to avoid throughout their pregnancy. However, the most useful dataset currently available (PRAMS) is restricted to the last three months of pregnancy. Thus, in analyzing these data, one must be careful not to over-generalize the results obtained from this measure.
SIGNIFICANCE	Many studies have documented the impact of alcohol use on the mother and her baby, including: miscarriage; premature birth; stillbirth; physical, mental and behavior problems and fetal alcohol syndrome in the child. It would of course be preferable for pregnant women to eliminate alcohol from the earliest days of pregnancy through the postpartum period. However, this PRAMS measure, even if limited in scope, is an important and concrete step towards positive outcomes for mother and child.

PERFORMANCE MEASURE:	Percentage of children enrolled in Medicaid who receive at least one recommended Child and Teen Checkup (C&TC) visit (EPSDT is known as C&TC in Minnesota).
STATUS:	Active
GOAL	Increase the percentage of children birth to 21 who receive recommended comprehensive well child visits.
DEFINITION	<p>This measure addresses the state priority need to Improve the Health of Children and Adolescents. This goal addresses both preventive and comprehensive health care for children and adolescents, specifically those receiving Medicaid.</p> <p>Numerator: Number of Medicaid children in Minnesota under age 21 who receive one or more Child and Teen Checkups (C&TC) in any given year.</p> <p>Denominator: Total number of children in MN under age 21 who are enrolled in Medicaid in any given year.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	Not applicable.
DATA SOURCES AND DATA ISSUES	Data Sources: State Medicaid database. Data Issues: These data are limited to children and adolescents enrolled in Medicaid. The percentage of Medicaid children/adolescents in Minnesota who receive Child and Teen Checkups (C&TC) each year has been rising steadily, from 62.4% in 2004 to 68.1% in 2008. We plan to continue expanding this percentage over the next five years.
SIGNIFICANCE	Improving the health of children and adolescents in Minnesota has been identified as a continuing Priority Need during the next five-year period. Within the Medicaid population, as well as the entire child/adolescent population in Minnesota, incidence of chronic disease is growing; particularly childhood obesity, diabetes, asthma, and mental health disorders. Prevention is the first step in overall health improvement. Well-child and adolescent health care are based on early identification of needs (C&TC), followed by intervention and treatment when indicated.

PERFORMANCE MEASURE:

Percentage of MN children birth to 5 enrolled in Medicaid who received a mental health screening using a standardized instrument as part of their C&TC visit (EPSDT is known as C&TC in Minnesota).

STATUS:

Active

GOAL

Increase the percentage of children birth to 21 whose social/emotional needs are identified early.

DEFINITION

This measure addresses the state priority need to Promote Optimal Mental Health. Increasing the proportion of children who receive a mental health screening will establish a baseline from which to build a positive mental health program for children in MN.

Numerator:

Number of MN children ages 0 to 5 years enrolled in Medicaid who receive a mental health screening using a standardized instrument as part of their C&TC in any given year.

Denominator:

Total number of MN children, ages 0 to 5 years, enrolled in Medicaid who receive a C&TC in any given year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

18-6 (Related)

Increase the number of persons seen in primary health care who receive mental health screening and assessment. (Not specific to children.)

18-7 (Related)

Increase the proportion of children with mental health problems who receive treatment. (Not specific to screening.)

DATA SOURCES AND DATA ISSUES

Data Sources: State Medicaid data for children ages 0 to 5 years (CPT code 96110 with modifier UC at a C&TC visit.) Data Issues: Data for young children ages 0 to 5 years are readily available and should be accurate, valid, and reliable, although the number of children screened is very small (1.2%). Content of mental health screening instruments varies among providers. It also varies between different age groups. Due to lack of data and unknown screening rates among older children, we are currently restricting our data collection to this age range.

SIGNIFICANCE

This measure expands on our 2005 state performance measure which was more general in nature: "Degree to which Title V programs enhance statewide capacity for a public health approach to mental health promotion and suicide prevention for children and adolescents." Mental health is an important component in the overall health of all children and adolescents. In Minnesota, emotional/mental health screening is viewed primarily from a prevention perspective or as a means to avert more serious mental health issues. As of 2009, we now have the capacity to specifically measure the number of young children enrolled in Medicaid who receive mental health screening as part of their Child and Teen Checkup (C&TC) health care visits.

PERFORMANCE MEASURE:

Rate of child maltreatment cases.

STATUS:

Active

GOAL

Reduce the incidence of child maltreatment.

DEFINITION

This measure addresses the state priority need to Reduce Child Injury and Death. A case is defined as a child maltreatment report which has met the initial screening criteria and forwarded to the field for additional assessment, which may result in either an alleged or determined case. Alleged cases are evaluated by either traditional or alternative methods. Traditional Assessment is a method where cases are processed through the court system where a determination of child abuse or neglect is made. If an allegation of abuse/neglect is substantiated, all subsequent proceedings are handled resolved within a judicial structure. Alternative or Family Assessment is based on a strengths and determination of abuse/neglect is not made. Services are provided for strengths and weaknesses. In alternative assessment, resolution and disposition of the case is informal. Family involvement with the court system is not mandated.

Numerator:

Number of new statewide child maltreatment cases, birth through 17 years, in any given year.

Denominator:

Total number of Minnesota children, birth through 17 years, in any given year.

Units: 1000 **Text:** Rate**HEALTHY PEOPLE 2010 OBJECTIVE**

15-33

Reduce maltreatment and maltreatment fatalities of children.

DATA SOURCES AND DATA ISSUES

Data Sources: Numerator: MN Department of Human Services (MDHS) Denominator: MN Center for Health Statistics (Vital Statistics birth records) Data Issues: Abuse and neglect are traditionally underreported; therefore, both incidence and prevalence are usually underestimated. While it might be advantageous to track the number of children allegedly maltreated rather than the number of maltreatment cases, many children would be counted more than once due to the large volume of reports received by Minnesota DHS and duplication of individual children. A case is a more consistent measure because it consolidates all of the reports received for a particular family or household, even though that family/household may contain more than one child.

SIGNIFICANCE

Child maltreatment is among the most prevalent and far-reaching forms of violence in Minnesota. All four maltreatment types (neglect, physical abuse, sexual abuse, mental/ emotional abuse) are represented here. Further, child and adolescent maltreatment often precedes adult violence and substance abuse/addiction as the abused child grows older. Alternative assessment and response to child maltreatment is an area of potentially great rewards because it includes both prevention and treatment. It is estimated that 70% of families reported to the Minnesota Child Protection System could derive greater benefit from alternative rather than traditional response. Tracking the incidence of all cases of child maltreatment (both alternative and traditional) should lead to greater insight in both prevention and treatment methods, as well as ultimate reduction in the incidence of child maltreatment.

PERFORMANCE MEASURE:	The number of children enrolled in the Follow-Along Program.
STATUS:	Active
GOAL	Increase the number of children enrolled in the Follow-Along Program.
DEFINITION	<p>This performance measure addresses the state priority need to Assure Quality Screening, Identification and Intervention. The measure was developed to track children from the time of birth to age three or five for the purpose of identifying those who may have special health care needs.</p> <p>Numerator: Total number of children enrolled in Minnesota's Follow-Along Program.</p> <p>Denominator: Not applicable to this measure.</p> <p>Units: Yes Text: Text</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>16-14</p> <p>Reduce the occurrence of developmental disabilities.</p>
DATA SOURCES AND DATA ISSUES	Data Sources: Minnesota Follow-Along Program; local public health data (counties) Data Issues: The number will include the count of any child enrolled in the Follow-Along Program any time during the calendar year. Some local programs serve children from birth to age three, some from birth to age five. All children within either of these age ranges will be counted.
SIGNIFICANCE	Significance: Early identification, screening, and referral systems are intended to identify both the strengths and needs of young children. These systems can maximize healthy child development and minimize negative health and socio-emotional events. Universal screening of all children, birth to age three, promotes thorough identification of those with special health needs. It also serves as a bridge to intervention services for eligible children under Part C of Individuals with Disabilities Education Act.

PERFORMANCE MEASURE:	Percentage of children under the age of one year participating in early intervention through Part C of the Individuals with Disabilities Education Act.
STATUS:	Active
GOAL	Increase the percentage of children under the age of one year participating in early intervention through Part C of the Individuals with Disabilities Education Act (IDEA).
DEFINITION	<p>This performance measure addresses the state priority need to Assure Quality Screening, Identification and Intervention. The Individual Family Service Plan (IFSP) is the instrument through which early intervention is implemented in accordance with the IDEA. Part C focuses on the specialized requirements of CSHCN and their families.</p> <p>Numerator: Number of Minnesota children birth to age one year with an Individual Family Service Plan (IFSP) in any given year.</p> <p>Denominator: Population of Minnesota infants, birth to age one year, in any given year.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>16-14</p> <p>Reduce the occurrence of developmental disabilities.</p>
DATA SOURCES AND DATA ISSUES	Data Source: Individuals with Disabilities Education Act (IDEA) data, available electronically on the Data Accountability Center web site. This will be a one-day count measured on December 1 annually. Data Issues: The Data Accountability Center (DAC) assesses state, regional and national needs related to data collection, analysis and reporting. It also develops data collection materials needed by specific states and provides customized TA for individual states. At the present time, the data which we need for this new state performance measure is included on their regular data menu. However, should we need specific measures or assistance, it appears that it may be available.
SIGNIFICANCE	Significance: This performance measure is primarily a family-centered identification and intervention strategy for very young children (0–1 yr.) with developmental disabilities. Through the Individual Family Service Plan (IFSP) process, family members and service providers work as a team to plan, implement, and evaluate services tailored to a family's specific concerns, priorities and resources.

PERFORMANCE MEASURE:

Percentage of participants in Minnesota's family home visiting program referred to community resources that received a family home visitor follow-up on that referral.

STATUS:

Active

GOAL

Increase the number of participants in Minnesota's family home visiting program that were linked to needed community resources and services.

DEFINITION

This measure addresses the state priority need to Improve Access to Quality Health Care and Needed Services. Linkage to community resources has been determined to be an important component of meeting the needs of pregnant women and care givers. Referral to community resources and follow up on those referrals are being used as an approximation of linking families to needed resources.

Numerator:

Number of prenatal clients or caregivers that had a family home visitor follow-up on that referral.

Denominator:

Number of prenatal clients or caregivers participating in the family home visiting program referred to community resources.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Not applicable to this measure.

DATA SOURCES AND DATA ISSUES

Data Sources: Minnesota Family Home Visiting Program data forms Data Issues: Much of our Family Home Visiting data is qualitative in nature, and as such it is a rich and valuable source of information. However, this measure relies largely on quantitative data gathered and reported on specific forms by nurses in the Family Home Visiting Program. Because a large percentage of these nurses are already engaged in performing follow-up visits to families receiving community resource referrals, the increase in this performance measure may be small.

SIGNIFICANCE

The Family Home Visiting Program (FHV) in Minnesota has expanded substantially in the last few years and now has an ambitious program providing outreach to counties and rural areas throughout the state. Home visiting is an important link between the MN Department of Public Health and local public health agencies, as well as between local public health (LPH) and residents of all 87 MN counties. Minnesota state statutes require that the FHV program collect information on referrals made in the program. This performance measure will be one of our first attempts to assess the effectiveness of the FHV program from the point of view of the referral process.

PERFORMANCE MEASURE:	Percentage of children and youth with special health care needs who have received all needed health care services.
STATUS:	Active
GOAL	Increase the number of families who report that their children have received all needed health care services.
DEFINITION	<p>This measure addresses the state priority need to Improve Access to Quality Health Care and Needed Services.</p> <p>Numerator: Number of Minnesota families of children with special health care needs who report on the National Survey of CSHCN that their children have received all needed health care services.</p> <p>Denominator: Total number of Minnesota families of children with special health care needs taking part in the National Survey of CSHCN.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	<p>16-23 (Related) Increase proportion of Territories and States that have service systems for children with special health care needs. These service systems should ensure access to a source of insurance for primary and specialty care and enabling services, an identified medical home, and care coordination.</p> <p>1-6 Reduce the proportion of families that experience difficulties or delays in obtaining health care or do not receive needed care for one or more family members.</p>
DATA SOURCES AND DATA ISSUES	Data Source: National Survey of Children with Special Health Care Needs (SLAITS) Data Issues: This national telephone survey is a sample of 700-800 households with CSHCN in each of the 50 states and is conducted every four years by CDC, using the sampling frame from the National Immunization Survey. Validity and reliability of the data rely on representativeness of the random sample drawn from each state and may be compromised by the ever-increasing use of cell phones as well as other factors, although sampling weights have been applied to adjust for non-telephone households and non-response bias. New data are only available every four years for comparison purposes.
SIGNIFICANCE	Children with special health care needs frequently need a wide array of services, including routine screening (e.g., vision, hearing, speech, mental health), ongoing health care (preventive, therapeutic and rehabilitative), educational/vocational, and transitional services. Coordination and access are key elements in obtaining these and other needed services.

PERFORMANCE MEASURE:	Percentage of families of children age 0-17 that report costs not covered by insurance are usually or always reasonable.
STATUS:	Active
GOAL	Increase the number of currently insured children who have insurance related out-of-pocket expenses that are usually or always reasonable.
DEFINITION	<p>This measure addresses the state priority need to Improve Access to Quality Health Care and Needed Services.</p> <p>Numerator: The weighted estimate of Minnesota respondents who answered that out-of-pocket expenses are "usually" or "always" reasonable.</p> <p>Denominator: The weighted Minnesota estimate for the total number of families surveyed by the National Survey of Children's Health who have current health insurance coverage.</p> <p>Units: 100 Text: Percent</p>
HEALTHY PEOPLE 2010 OBJECTIVE	Not applicable.
DATA SOURCES AND DATA ISSUES	Data Source: National Survey of Children's Health (SLAITS), 2007. Questions K3Q21a and K3Q21b. Data Issues: This survey is not conducted every year; thus the data may not always be as current as desirable. Also when establishing an accurate denominator, it may be difficult to determine the number of survey respondents who responded to this specific question. In general, however, SLAITS data are known to be valid and reliable.
SIGNIFICANCE	Although Minnesota has a high percentage of residents with "adequate" health insurance coverage—particularly when compared with other states—data from previous SLAITS surveys shows that Minnesotans are concerned about excessive out-of-pocket expenses. Therefore, this new state performance measure does have significance for this state.

PERFORMANCE MEASURE:

By 2013, in collaboration with other state agencies, identify a state performance measure and benchmark to monitor positive youth development in Minnesota.

STATUS:

Active

GOAL

Develop a state performance measure to monitor positive youth development in Minnesota.

DEFINITION

Positive youth development is an intentional strategy to promote youths being, belonging and becoming within the context of connectedness. Positive youth development occurs in various settings and contexts. It uses an asset-based approach, requires active youth participation, acknowledges evolving capacities, and responds to the physical, social, emotional and cognitive needs of youth. Healthy youth development is the priority need area for this measure.

Numerator:

Not yet applicable.

Denominator:

Not yet applicable.

Units: Yes **Text:** Text

HEALTHY PEOPLE 2010 OBJECTIVE

Because we have adopted a positive stance rather than a negative approach toward healthy youth development, we did not find a relevant HP 2010 Objective. (See last paragraph: "Significance")

DATA SOURCES AND DATA ISSUES

Data Source: To be determined. Data Issues: The MDH was recently funded through the National 4-H Council to support the work of a team professionals from several agencies (Departments of Health, Public Safety, Education, Human Services, the University of Minnesota Extension office, and a youth participant from Youth Community Connections) interested in youth issues. The grant will support the team's work on the development of a shared Minnesota definition and measurement of positive youth development. Constructing a composite measure often has built-in data issues, particularly in terms of its validity and reliability. However, this type of measure has been developed successfully in other state. Construction of a measure which is acceptable and useful to all of the involved agencies may present an additional challenge.

SIGNIFICANCE

Most goals which involve teens and adolescents involve reduction of negative behaviors, such as high school dropout, criminal behavior, alcohol use, smoking, sexually transmitted infections, and teen pregnancy. This goal adopts an affirmative approach, focusing instead on positive elements of healthy youth development.

